Part C State Annual Performance Report (APR)
Reporting Period: July1, 2006 – June 30, 2007 (FFY 2006)

Overview of the Annual Performance Report Development

The FFY 2006 APR was developed based on the BabyNet data system (BabyTrac) June 29, 2007 caseload information, input from staff in collaborating agencies, and the current policy and procedure manual. The information included in this report was reviewed in detail with a group of BabyNet program stakeholders, including the current SICC chair on January 25, 2008.

After over three years of work by collaborating agencies under DHEC leadership, a comprehensive, fully updated policy and procedure manual was completed and released in August 2006. This was the first time in over four years that the entire BabyNet system operated under a single set of collaboratively developed guidelines written to assure full compliance with current IDEA Part C laws and regulations. The revision to the BabyNet policy and procedure manual that reflects programmatic changes made in response to the Compliance Agreement went into effect in September 2003. Therefore, the data provided in this report was collected prior to full implementation of changes required to assure adequate performance on all indicators. Nonetheless, this report documents substantial improvement in Part C program implementation.

The "overview of the system" section of the SPP has been revised to provide more detailed information about BabyNet system operation. The improvement activities listed in the State Performance Plan (SPP) will be updated as appropriate based on response to this APR. No changes will be made to SPP performance targets until they can be reviewed by a functioning SICC. DHEC is waiting for action by the Governor's Office to seat a SICC that is in full compliance with state and federal requirements. DHEC has received and responded to Governor Office instructions related to the Governor's preferences for SICC appointments. DHEC is actively working with the Governor's Office to get this completed by the end of FFY 2007.

The FFY 2006 Annual Performance Report and the State Performance Plan are posted on the web at www.scdhec.net/babynet.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 1: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner. (20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services.

FFY	Measurable and Rigorous Target
2006	100%

Actual Target Data for FFY 2006: 92%

Discussion of Improvement Activities Completed and Explanation of that occurred for FFY 2006 (2005-2006):

Measurement

Measurement is based on program data system (BabyTrac) information. Timely services are defined as services initiated within 30 days of entry into IFSP that has been signed by the parents. Current data was collected through BabyTrac as follows.

Numerator: 3,333 # active children on 06/29/07 with IFSP service start date no more

than 30 days after IFSP completion date

Denominator: 3,616 # active children on 06/29/07 with an IFSP

All service coordinators are responsible for entering the following dates into BabyTrac system: IFSP completion date; planned start date for all services listed on the IFSP (same as IFSP date unless the team specifically determines need to delay service initiation); and date child first receives the service.

Explanation of Progress or Slippage

There is a serious lack of qualified providers of pediatric special therapy services in SC. There are no providers in the rural areas, and in urban areas the practicing therapists can not meet the demand for their services.

Analysis of data, anecdotal information and direct observation reveal that delays in service initiation are primarily to lack of providers available to provide speech, PT, and/or OT services in natural environments. Current data indicate a slight decrease from FFY 2005 performance level (95%), reflecting year to year variability.

Actions to improve performance and/or correct identified non-compliance

ı	mprovement Activity	Lead Person / Agency	Completion Date	Notes
1.	Data system modifications	DHEC	On-going	Beginning in September 2005 the BabyTrac system was modified to allow direct data entry by each service coordinator and supervisor. This facilitates prompt BabyTrac data entry and helps to assure that information used to generate reports is fully up-to-date. The staff training process continued through the fall of 2005. A DHEC BabyNet staff member is available to assist BabyTrac users during regular business hours. The DHEC BabyTrac contractor maintains a help desk around the clock.
2.	Policy manual revisions, clarifications	DHEC	June 30, 2008	BabyTrac data entry instruction appendix for the policy and procedure manual is being completed and will be added to the manual.
3.	Increased monitoring	DHEC	On-going	In April 2006 DHEC positions were established for three regional BabyNet consultants who immediately assumed responsibility for assuring regular, systematic and consistent review of information related to system implementation at monthly local team meetings in each system point of entry (SPOE) service area. These meetings are used to identify and address issues related to performance on key indicators and to monitor trends within each area.
				These consultants now attend all monthly local interagency coordination team meetings in each of the 12 BabyNet service areas. These meetings are used to: identify need for additional training or technical assistance related to prompt data entry by all service coordinators; review provider accessibility; identify opportunities for identifying and recruiting new providers; and to discuss means of retaining and make optimal use of current providers.
				While DHEC is responsible for monitoring system-wide program implementation, each service coordinating agency (DHEC, DDSN, and SDB) maintains separate agency-specific system(s) for monitoring adherence to BabyNet program policies and procedures. Each is responsible for intra-agency follow up based on findings, and for bringing system-wide issues to regularly scheduled state-level program manager meetings and/or local coordinator team meetings for problem solving or policy clarification or policy revision as needed.

I	mprovement Activity	Lead Person / Agency	Completion Date	Notes
4.	Designated provider relations staffing DHEC On-going		On-going	In April 2006, a two-member team was assigned leadership for recruitment and retention of BabyNet contracted providers. This team was established to assure the support and responsiveness to concerns required to attract and retain providers necessary to delivery Part C services to eligible children.
				For some time providers leaving the BabyNet program have reported frustration with getting and maintaining a DHEC contract, slow and/or inadequate reimbursement, fiscal constraints to serving children solely in a natural environment, paperwork burden, and other problems associated with meeting BabyNet requirements.
5.	Streamlining contract process	DHEC	On-going	Close work with the DHEC operations staff responsible for developing and executing contracts to streamline the process and reduce time required to become a contracted BabyNet provider.
6.	Increase number of contracted service providers	DHEC	On-going	A net additional 136 providers have contracted with DHEC for BabyNet services since the beginning of FFY 2006. In addition, several currently contracted providers added additional therapists and specialties to their group practice.
				The following activities have or will support provider recruitment and retention:
				Updates and revisions of the BabyNet contracted provider database will facilitate monitoring availability of and access to Part C services, and to target recruitment efforts.
				This information will be used to guide provider recruitment and retention activities once more general statewide improvements described in this report have been institutionalized.
				Establishing a system of regular communication with providers that includes periodic email updates and immediate notification of changes affecting provider services.
				 Partnering with professional organizations to communicate contract requirements and recruit new providers.
				Provider relations staff make personal contact with formerly contracted providers to discuss the possibility of implementing new contracts.
				They have intensified identification and contact with potential providers in areas of highest need to inform them about the BabyNet system, and to encourage them to contract with BabyNet to provide services.
				Regional BabyNet consultants and system managers contribute to, and/or build upon, these contacts.

I	mprovement Activity	Lead Person / Agency	Completion Date	Notes
7.	Reducing interval between billing and payment	DHEC	On-going	Continued work with the BabyNet fiscal agent to streamline the reimbursement process to assure prompt payment for services to children enrolled in the program.
8.	Closer monitoring of fiscal agent activities.	DHEC	On-going	Semi-annual on-site monitoring visits began in FFY 2007 to work with fiscal agent to assure prompt and appropriate reimbursement to DHEC contracted Part C service providers.
9.	Revised fee schedule	DHEC	November 2007	BabyNet reimbursement guidelines were promptly revised to reflect increased Medicaid reimbursement levels. These reimbursement increases resulted in increased provider interest in working with the BabyNet program and will directly affect the number of Part C service providers in the state.
10.	Provider training and technical assistance related to third party billing.	DHEC	First round of sessions FFY 2007, additional sessions based on demand.	Provider relations staff identified contracted provider need for basic information about process of billing Medicaid and private insurance companies for their services. Staff have arranged for training sessions to meet this need. Though it is not directly related to provision of Part C services, this responsiveness to provider needs is critical for maintaining a cadre of providers willing to provide BabyNet services.
11.	Facilitating interpreter certification	DHEC	On-going	Lack of Spanish (or other) language interpreters can delay initiation or continuation of services. BabyNet provider relations staff now serve as liaison with the DHEC Office of Minority Health which certifies interpreters serving all DHEC programs, to facilitate completion of this process which is now required for BabyNet providers.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2006

SPP improvement activities will be updated following OSEP review of this APR.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 2: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children. (20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement: Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children) divided by the (total # of infants and toddlers with IFSPs)] times 100.

FFY	Measurable and Rigorous Target
2006	96%

Actual Target Data for FFY 2006: 88%

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2006 (2006-2007):

Measurement

Service sites previously reported to OSEP for FFY 2006 (when number of active children with an IFSP totaled 3381):

Setting	#	%
Home*	2,798	83%
Community*	182	5%
Other	401	12%
TOTAL	3,381	100%

(*natural environment)

Explanation of Progress or Slippage

The persistent lack of available providers is the primary reason for serving children eligible for IDEA Part C services outside the natural environment. The supply of pediatric special therapy providers in South Carolina is limited and those available are not distributed evenly across the state. Services are more available in urban clinic or office sites than elsewhere. BabyNet program service coordinators do everything possible to get needed developmental services to all children eligible for program services.

In the past BabyNet reports to OSEP have included information about "waiting lists" for Part C services. Currently, when service providers are not available to serve children in the natural environment, the family may opt for clinic-based services while the service coordinator continues to

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¹ At the time of the release of this package, revised forms for collection of 618 State reported data had not yet been approved. Indicators will be revised as needed to align with language in the 2005-2006 State reported data collections.

seek services in the natural environment. This allows prompt initiation of IFSP services. Otherwise initiation of service is delayed until a natural environment provider is identified.

Actions to improve performance and/or correct identified non-compliance

	Improvement Activity	Lead Person / Agency	Completion Date	Notes
1.	Prior review of IFSP services when site is outside the child's natural environment.	DHEC	November 2007	IFSP form revised to require specific documentation, and supervisor review and approval of all IFSP services are not planned for delivery in home or community settings (natural environment).
				The service coordinator must document reasons and confer with their supervisor to assure that all options for immediate identification of a natural environment provider have been exhausted, and that an appropriate plan is in place to move services to a home or community setting as soon as possible.
2.	Training	DHEC	May 2008 with follow up as indicated	Service coordinator and provider training designed to increase use of "consultative" methodologies will begin with multiple sessions planned for a to-be-annual conference scheduled for May 2008. These methodologies will allow optimal "reach" of all available providers through increased emphasis (where appropriate) on provider consultation with families and service coordinators in lieu of more frequent provider sessions with each child.

(See also provider recruitment and retention activities.)

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2006

SPP improvement activities will be updated following OSEP comment on this APR and SICC review. Changes to the target will be considered in FFY 2007 for submission in the APR due February 1, 2009.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 3: Percent of infants and toddlers with IFSPs who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/ communication); and
- C. Use of appropriate behaviors to meet their needs.

(20 USC 1416(a)(3)(A) and 1442)

Measurement:

- A. Positive social-emotional skills (including social relationships):
 - a. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = # of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers divided by # of infants and toddlers with IFSPs assessed times 100.
 - b. Percent of infants and toddlers who improve functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed times 100.
 - c. Percent of infants and toddlers who did not improve functioning = # of infants and toddlers who did not improve functioning divided by # of infants and toddlers with IFSPs assessed times 100.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

- B. Acquisition and use of knowledge and skills (including early language/communication):
 - a. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers
 = # of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers
 divided by # of infants and toddlers with IFSPs assessed times 100.
 - Percent of infants and toddlers who improved functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed times 100.
 - c. Percent of infants and toddlers who did not improve functioning = # of infants and toddlers who did not improve functioning divided by # of infants and toddlers with IFSPs assessed times 100.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

- C. Use of appropriate behaviors to meet their needs:
 - a. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = # of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers divided by # of infants and toddlers with IFSPs assessed times 100.
 - b. Percent of infants and toddlers who improved functioning = # of infants and toddlers who improved functioning divided by # of infants and toddlers with IFSPs assessed times 100.
 - c. Percent of infants and toddlers who did not improve functioning = # of infants and toddlers who did not improve functioning divided by # of infants and toddlers with IFSPs assessed times 100.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

Overview of Issue/Description of System or Process:

University of South Carolina Center of Excellence (DHEC contractor) served as the lead for developing, conducting and evaluating processes and outcomes related to this indicator with guidance from OSEP and the lead agency (DHEC). The data collection and reporting plan was designed, presented to the Interagency Coordinating Council (ICC) and approved by the lead agency. The outcome measurement process was developed to be an ongoing process.

South Carolina (SC) will capture data on all children at *entry* and at *exit* of the early intervention system, known as BabyNet. SC has defined "*entry*" as the point at completion of the initial IFSP, while "*exit*" has been defined as the

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point at completion of final the IFSP for discharge/transition out of BabyNet. In 2006-2007, each child's initial measurement of status at entry for each outcome was captured using the Early Childhood Outcomes Center (ECO) guided processes, rating scale points and definitions.

SC has implemented the ECO process with ECO approved state specific Child Outcomes Worksheet (COW) and Child Outcomes Summary Form (COSF). Both forms encourage the use of a variety of sources of information to provide a holistic picture of a child's functional status at entry and exit. A variety of input from informal interactions and formal assessments encouraged during process, including the use of the Hawaii Early Learning Profile (HELP); Assessment Evaluation & Programming System (AEPS); Insight Developmental Checklist; Oregon Project. Utilization of additional assessments will be considered by SC as crosswalks are developed on a national level.

In FFY 2006, several state-specific training materials were developed and disseminated related to the child outcomes process. Information was disseminated via written manual, informational brochures, web-based training modules; Allied e-Health Newsletter; and on-site training sessions.

All materials were developed with TA from the National Early Childhood Technical Assistance Center (NECTAC) and Early Childhood Outcome Center (ECO) as well as collaborative conversations with various states. NECTAC and ECO staff provided a joint face-to-face training with the University of South Carolina- Team for Early Childhood Solutions (TECS) staff for BabyNet system personnel. Electronic databases were designed and implemented by TECS for capturing of "entry" and "exit" data for each child. These electronic databases are maintained and monitored by TECS for quality assurance and analysis. TECS has provided training and technical assistance regarding electronic database, data collection, as well as data input and will continue to provide ongoing training and technical assistance for BabyNet system personnel to insure fidelity and accuracy of data.

The initial cycle for the reporting of progress data has resulted in some changes in the SC Part C procedures for child outcomes. The following are changes from our initial procedure instructions:

- Collection of entry data will be expanded from 24 months to 30 months of age. SC continues to work to identify
 and enroll children at younger ages. The age change for child outcomes entry data capturing was made with
 the intent to assist with increasing the amount of children included in the entry outcomes data phase, which in
 turn will increase amount of children included in the exit outcomes data phase.
- Service coordinators will continue to drive the child outcomes process. There has been an expansion of service coordinators who participate in the child outcomes entry process as a result of policy changes implemented beginning in FFY 2006.
- 3. The development and inclusion of a child outcomes verification process in the early intervention general monitoring process. A child outcomes verification process is currently being developed to improve the sophistication of monitoring and quality assurance within the system. This process is tentatively scheduled for system piloting in February 2008.

Baseline Data:

Although this is not baseline data, and targets are not due until February 2010, the progress of our first year of functional status data collected and reported to OSEP in the 2007 APR/SPP will be reported in this section. Data collection for child outcomes began in SC on August 1, 2006 with three months of entry data collection reported in the 2007 APR/SPP. The initial cohort included 346 children who met the entry data collection criteria. February 1, 2007 marked the beginning of the first phase of exiting the early intervention system for children having been enrolled in the Part C system for at least 6 months. This gave SC five months of exit data collection to be used for OSEP reporting.

This year's report captures a limited number of children (11) in the initial cohort who reportedly exited our system between February 1, 2007 (marking 6 months of service for children who entered system in any time on or after August 1, 2006), and June 30, 2007.

Summary of current data:

Positive social-emotional skills (including social relationships)	#	%
Did not improve functioning	0	
Improved functioning, but not sufficient to move nearer to comparable to sameaged peers	2	18%
Improved functioning to a level nearer to same-aged peers, but did not reach	3	27%
Improved functioning to level comparable to same-aged peers	5	46%

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Maintained functioning at level comparable to same-aged peers	1	9%
TOTAL	11	100%
Acquisition and use of knowledge and skills (including early language / communication):	#	%
Did not improve functioning	0	,
Improved functioning, but not sufficient to move nearer to comparable to sameaged peers	1	99
Improved functioning to a level nearer to same-aged peers, but did not reach	3	279
Improved functioning to level comparable to same-aged peers	6	55
Maintained functioning at level comparable to same-aged peers	1	9
TOTAL	11	100
Use of appropriate behaviors to meet their needs	#	%
Did not improve functioning	0	
Improved functioning, but not sufficient to move nearer to comparable to sameaged peers	3	27
Improved functioning to a level nearer to same-aged peers, but did not reach	3	27
Improved functioning to level comparable to same-aged peers	5	46
Maintained functioning at level comparable to same-aged peers	0	
TOTAL	11	100

Discussion of Baseline Data: Progress data will be reported in 2010; however, current "n" is very low as a result of several factors. SC began data collection a month later than the targeted timeframe as we had cross-over time with the OSEP compliance agreement and implementation of the revised policy and procedures along with the design and implementation of our state's child outcomes process. This caused child outcomes training and implementation efforts to be a challenge, resulting in limited amounts of child outcomes data collection for the initial OSEP status report (n=346).

This limited "n" status report has resulted in the limited "n" exit reported for progress in this year's report. Training efforts have been ongoing with the continuation of our online child outcomes training module, updated web page and resources, face-to-face training efforts and other TA activities. Currently our entry data collection is significantly greater than last year's with expectations of higher "n" value for children to be included in entry and exit data for the February 2009 APR/SPP.

Measurable and Rigorous Target:

Targets will be set in 2010.

Improvement Activities/Timelines/Resources:

Current improvement activities will continue as planned without any adjustments from last year, to assist with improving the child outcomes reporting process as well as ensure valid and reliable data.

Improvement Activity	Lead Person / Agency	Completion Date	Notes (including resources needed)
Ongoing training with BabyNet system personnel to increase knowledge and skill regarding child outcomes and child outcomes processes.	DHEC, State ICC, TECS	On-going	Includes NECTAC/ECO resources and TA
Ongoing training with BabyNet system personnel to increase comfort and utilization of electronic database portal for collection of "entry" and "exit" data.	DHEC, State ICC, and TECS	On-going	
Regular (monthly) contact monitoring for correlation of the consistency between electronic databases to ensure same number of children entering BabyNet system are being .reported in the electronic database with an <i>entry</i> rating and the same number transitioning from the BabyNet system are being reported in the electronic database with an <i>exit</i> rating.	DHEC, SC Budget and Control Board, and TECS	On-going	New BabyTrac reports to be developed for TECS
Regular (at least monthly) communication to report electronic data input inadequacies to BabyNet personnel.	DHEC and TECS	On-going	Includes communication with Regional level BabyNet personnel for information dissemination to local levels.
Implement quality assurance/monitoring activities to ensure internal reliability of rating decision making processes through BabyNet monitoring system.*	DHEC	On-going	Includes BabyNet monitoring team
Ongoing synthesis of child outcomes process with general BabyNet policies.	DHEC	On-going	Includes BabyNet Interagency Program Managers

^{*} Using child outcomes worksheet (COW) and child outcomes summary form (COSF) reviews.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 4: Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

(20 USC 1416(a)(3)(A) and 1442)

Measurement:

- A. Percent = # of respondent families participating in Part C who report that early intervention services have helped the family know their rights divided by the # of respondent families participating in Part C times 100.
- B. Percent = # of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs divided by the # of respondent families participating in Part C times 100.
- C. Percent = # of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn divided by the # of respondent families participating in Part C times 100.

Overview of Issue/Description of System or Process:

University of South Carolina Center of Excellence (DHEC contractor) served as the lead for developing, conducting and evaluating processes and outcomes related to this indicator with guidance from OSEP and the lead agency (DHEC). The data collection and reporting plan was designed, presented to the Interagency Coordinating Council (ICC) and approved by the lead agency.

The NCSEAM family survey was chosen with consensus that it would best meet BabyNet program needs. The family's initial/baseline measurement for this outcome was captured using the impact portion (22 questions) of the *Family Survey* developed by the *National Center for Special Education Accountability and Monitoring (NCSEAM)* with five added demographic questions. The NCSEAM *Family Survey* was choose because it had been tested and proved to have adequate levels of validity and reliability at the time of South Carolina (SC) implementation. The impact portion of the survey focuses on the *"Impact of Early Intervention Services on Your Family"*. This portion of the survey was designed for states to use to report state performance on the Part C indicators #4a, 4b, and 4c which determine if families feel that early intervention services have helped them 4a- know their rights, 4b- effectively communicate their children's needs, and 4c-help their children develop and learn. The five demographic questions were included to provide SC with information regarding the representation of children and families completing the survey. It was determined that SC would use the NCSEAM recommended standards corresponding to the following scale values and would be used as "cut scores": 4a (know their rights)= 539; 4b (effectively communicate their children's needs)= 556; and 4c (help their children develop and learn)= 516. These cut scores represent the minimum level of services that parents, advocates, researchers, and administrators agree should be attained in all programs, for all children.

Baseline Data for FFY 2006:

The following table shows the percentage of families who reported that they were helped on each of the target areas. 76% of the surveyed families reported that early intervention services helped them know their rights; 69% indicated that early intervention services helped them effectively communicate their child's needs; and 85% reported that early intervention services helped them help their child develop and learn.

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FFY	Percentage of families who state that early intervention services have helped them:					
2006	A.	B.	C.			
	Know their rights	Effectively communicate their child's needs	Help their child develop and learn			
	76%	69%	85%			

Discussion of Baseline Data:

Overview of Initial Family Survey Process

The SC family survey process was altered to survey all families with children exiting the system as a result of aging out of system and transitioning to the SC Part B system. The exclusion of children who had been in the system for less than six months prior to transitioning/exiting due to factors such as relocation, voluntary exits, or deceased remained constant. The family surveys were distributed three months prior to the child's exit of the SC Part C system. The SC Budget and Control Board-- who manages Part C data through an electronic system known as *BabyTrac* provided the family contact information for mailings. A total of 1031 families met the established criteria.

These families all received an *Invitation to Participate* as written notification, a *Frequently Asked Questions Sheet*, a *Brochure*, a *Survey*, and a *Postage Paid Envelope*. They were asked to complete and return the survey within thirty-days. The families were offered three options for the completion of the survey-- paper and pen, online, and proxy service. TECS teamed with local family support groups and provided information and training regarding IDEA 2004, the NCSEAM family survey, and the importance of capturing SC data regarding the impact of our BabyNet system. The proxy service provided community contacts from local family support groups for those families who felt they had limitations such as reading, language, or comprehension for the completion of the survey.

Of the offered formats 99% (n= 278) were completed using paper and pen; 1% (n= 4) were completed online; none were completed using proxy service. It was felt that families may not have had a clear understanding of the functions of the proxy service or did not have a comfort level for initiation of proxy services for completion of the survey. In addition to using the impact portion of the NCSEAM survey, SC adopted the use of Scantron resources to insure additional reliability and validity of survey results. The paper survey was validated manually and electronically for incomplete and missed responses while the online survey was password protected. Of the 1031 mailed surveys—5% (n= 47) were returned with insufficient addresses; 67% (n=686) gave no responses on returned surveys. Of the 282 returned surveys 249 provided responses to the survey's Impact of EI Services on Families rating scale items. These cases provide the raw material for the bulk of our report. The overall response rate for the SC family survey was 28% (rounded up from 27.8%), which is a significant increase from our 18% response rate in 2006.

Overview of SC Year 1 Family Survey Data Collected in FFY 2006

Statistical Summary STATE OF SOUTH CAROLINA

PART C Early Intervention Family Survey Report For Data Collected in 2007

SPP/APR Indicator #4a: Percent of families participating in Part C who report that early intervention

services have helped the family: Know their rights.

Standard: A .95 likelihood of a response of "agree," "strongly agree" or "very strongly agree"

with this item on the NCSEAM survey's Impact of El Services on Your Family

scale:

"Over the past year, Early Intervention services have helped me and/or my family: know about my child's and family's rights concerning Early Intervention services."

State: South Carolina

Percent at or above indicator 4A standard (539): 76% Standard Error (SE) of the mean (2.7%)

SPP/APR Indicator #4b: Percent of families participating in Part C who report that early intervention

services have helped the family: Effectively communicate their children's needs.

Standard: A .95 likelihood of a response of "agree," "strongly agree" or "very strongly agree"

with this item on the NCSEAM survey's Impact of El Services on Your Family

scale:

"Over the past year, Early Intervention services have helped me and/or my family: communicate more effectively with the people who work with my child and family."

Percent at or above indicator 4B standard (556): 69% Standard Error (SE) of the mean (2.9%)

SPP/APR Indicator #4c: Percent of families participating in Part C who report that early intervention

services have helped the family: Help their children develop and learn.

Standard: A .95 likelihood of a response of "agree," "strongly agree" or "very strongly agree"

with this item on the NCSEAM survey's Impact of El Services on Your Family

scale:

"Over the past year, Early Intervention services have helped me and/or my family:

understand my child's special needs."

Percent at or above indicator 4C standard (516): 85% Standard Error (SE) of the mean (2.3%)

Number of Valid Responses: 249 Mean Measure: 652

Measurement reliability: 0.93 - 0.96 Measurement SD: 165

Averages of 8 U.S. states' 1,750 families participating in the 2005 NCSEAM Pilot Study:

	Indicator					
	Α	В	С	Mean	SE of Mean	SD
Value	74%	70%	84%	644	0.9% - 1.1%	158

Technical note: There is always a certain amount of error in estimating a value for the entire population of families in a state, based on data from a sample of families. Given the size of the population of families receiving early intervention services, and the number of families from whom completed surveys were received, there is a 95% likelihood that the true value of these percentages is as much as 7.8% less or more than the values given, depending on the standard error of the mean for each indicator.

Results Summary

The percents reported to OSEP for SPP/APR indicators 4a, 4b, and 4c are calculated as the percent of families whose measures are at or above a standard that is specific to each indicator. In these analyses, the standards applied were the standards recommended by a nationally representative stakeholder group convened by NCSEAM.

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State: South Carolina

This group identified items that most closely represented the content of each of the indicators and recommended the level of agreement that should be required on these items. For indicators 4a, 4b, and 4c, the recommended standards were measures of 539, 556, and 516, respectively, since these are the calibrations of the items most closely related to the indicators. The percent reported to OSEP for each indicator is the percent of families with measures on the Impact of Early Intervention Services on Your Family scale that are at or above these levels.

Figure 1

Mean = 651.64 Std. Dev = 165.239 Part C Impact on Family Measures

South Carolina Part C Impact of El Services on Families Measures

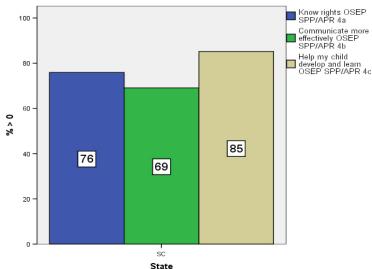
Figure 1 shows the distribution of measures on the Impact on Families scale for all families whose data were submitted for this analysis. The overall average of all the individual family measures is 669.

Vertical lines drawn at 539, 556, and 516 on the x-axis illustrate that the percentages of responding South Carolina Part C families with measures at or above these levels are 76%, 69%, and 85%, respectively, as shown in the previous page's summary statistics.

These percentages are the proportions of parents surveyed who indicate that the quality of the EI services received by their children and families meets or exceeds the standards set by a nationally representative group of early intervention stakeholders convened by NCSEAM in New Orleans in June, 2005.

These standards were explicitly intended to set high, but achievable, goals. They represent the minimum level of services that parents, advocates, researchers, and administrators agree should be attained in all programs, for all children.

Figure 2
South Carolina Part C Impact of El Services on Families Measures by %



Part C State Annual Performance F (OMB NO: 1820-0578 / Expiration Late. 12/01/2009)

Indicator #4

Figure 2 shows the percentages on the Impact on Families in South Carolina Part C system regarding indicators #4a, 4b, and 4c which determine if families feel that early intervention services have helped them 4a- know their rights, 4b-effectively communicate their children's needs, and 4c-help their children develop and learn.

Statistics indicated that 98% (n=275) respondents answered the question that explored the "child's race/ethnicity" and that of these respondents the largest race/ethnicity was white (59% or n= 161) with the second largest race/ethnicity was black or African-American (27% or n=75). Hispanic/Latino (7% or n= 20), Multi-Racial (3% or n=7), Asian/Pacific Islander (3% or n= 9) and American Indian or Alaskan Native (1% or n= 3) trailed behind the two largest groups. (See Figure 3 below.) The survey data is demographically representative of the families within the BabyNet system.

Measurable and Rigorous Target:

Setting a measurable and rigorous target for the state's performance on these indicators involves determining (a) what amount of change indicates *real* improvement, and not just random variation owing to sampling error; and (b) what amount of change indicates *meaningful* improvement, that is, a change that is likely to improve services and results for children with disabilities. Whereas (b) is a matter of judgment that is best determined by stakeholders, (a) is a straightforward matter of applying standard statistical computations. NCSEAM has developed a target calculator that states can use to determine the minimum increase in percent that would represent a statistically significant change in the positive direction. SC used the NSEAM calculator to assist with setting the measurable and rigorous targets. Stakeholder input was gathered to set targets for improving percentages through the ICC meeting and targets were approved by lead agency.

NCSEAM has developed a target calculator that states can use to determine the minimum increase in percent that would represent a statistically significant change in the positive direction. SC used the NSEAM calculator to assist with setting the measurable and rigorous targets.

Stakeholder input gathered at the January 23, 2007 meeting of the State ICC was used to set targets for improving percentages.

		Measurable and Rigorous	Target	
	A.	B.	C.	
FFY	Know their rights	Effectively communicate their child's needs	Help their child develop and learn	
2005 (2005-2006) Baseline	74%	70%	86%	
2006 (2006-2007)	76%	69%	85%	
2007 (2007-2008)				
2008 (2008-2009)				
200 9 (2009-2010)				
2010 (2010-2011)				

Improvement Activities/Timelines/Resources:

The following are planned activities for improvement of family survey data collection.

Improvement Activity	Lead Person / Agency	Completion Date	Notes (including resources needed)
Monthly mail-outs. Family Survey mail outs within 30-days of child's projected BabyNet "exits/transitions" to all families with stated criteria to improve overall response rate of completed surveys.	DHEC, SC Budget and Control Board, TECS	On-going	
Regular (at least monthly) communication to exchange needed information for monthly mail outs of Family Surveys.	DHEC, SC Budget and Control Board, and TECS	On-going	Includes BabyTrac folder with available information for access by TECS
Training of community family support groups regarding proxy service and processes.	DHEC, ICC, TECS, and local community partners	On-going	Includes contacting such groups as Pro- Parents, Family Connections
Implement quality assurance/monitoring activities to ensure internal reliability of manual and electronic validation systems through at least quarterly internal audits.	TECS	On-going	Includes TECS evaluation team
Training of BabyNet personnel related to helping families know their rights; effectively communicating their child's needs; helping them help their children develop and learn.	DHEC and TECS	On-going	Includes communicatio with Regional level BabyNet personnel for information dissemination to local levels.
Training of community family support groups related to helping families know their rights; effectively communicating their child's needs; helping them help their children develop and learn.	DHEC, ICC, and TECS	On-going	Includes contacting such groups as Pro- Parents, Family Connections

Overview of the Annual Performance Report Development:

Same as previously described.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 5: Percent of infants and toddlers birth to 1 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data. (20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to National data.

FFY	Measurable and Rigorous Target				
2006	(A)	% Toddlers birth to 1 with IFSPs compared to other States with similar eligibility definitions	Meet or exceed comparison state average		
2006	(B)	% Infants and toddlers birth to 1 with IFSPs compared to national data	Meet or exceed national %		

Actual Target Data for FFY 2006:

(A) Less than comparison state average

(B) Less than national %

	Total population birth to 1	Population birth to 1 with IFSPs	% Population birth to 1 with IFSPs	Average % pop birth to 1 with IFSPs
National data (50 states and DC)	4,130,153	57,330	1.04	
States w/ NARROW eligibility criteria				0.93
South Carolina	43,448	468	0.82	

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2006 (2006-2007):

Explanation of Progress or Slippage

The proportion of children under age one receiving BabyNet services improved from 0.66% in FFY 2005 to 0.82% for FFY 2006. Although performance remains below the established targets, which are keyed to comparison state averages and national data, FFY 2006 performance is above the median and within one standard deviation of comparison state and national data.

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Actions to improve performance and/or correct identified non-compliance

Improvement Activity	Lead Person / Agency	Completion Date	Notes
Linkages with neonatal intensive care units (NICUs)	DHEC		DHEC will intensify work with physicians and others serving infants in neonatal intensive care units and other newborns with conditions associated with developmental delay to increase knowledge of BabyNet services and procedures for referral. (This is a regular activity of contract staff in Family Connections.)
			BabyNet website will be further revised to facilitate access to BabyNet referral information.
			Examples of current activities:
			Medical University of South Carolina (MUSC, Charleston) referrals are made by the discharge planner to the SPOE office that serves Charleston, regardless of the area the child lives in. The Charleston BabyNet staff make sure that the child is linked to the BabyNet SPOE office closest to the residence. Quarterly a printout is sent from MUSC listing all the children discharged from the NICU during that quarter so that the BabyNet office can verify that all referrals were received.
			McLeod (Florence) referrals are made to the BabyNet office regardless of the home county and they disseminate them to the SPOE office serving that area. The NICU social worker makes all the referrals.
			 Greenville Hospital System (Greenville) referrals are made to the Greenville SPOE office with a copy of the discharge summary. Greenville BabyNet staff will disseminate to home county as needed.
			USC (Palmetto Richland, Columbia) referrals are made by the nursing staff in the NICU to the SPOE office nearest the child's residence.
Data system revisions	DHEC	March 2008	(BabyTrac) report will be created to report average age at referral as a means of monitoring age at entry.
Facilitating physician referrals	DHEC	On-going	Update on BabyNet program services and status during quarterly DHEC Commissioner's Pediatric Advisory Council at the request of the group in FFY 2007. This information will be provided on a regular basis in person or in written materials circulated to the group. The group provides suggestions and feedback on program plans for facilitating physician referrals.
Data analysis and tracking to set targets	DHEC	June 30, 2006	BabyNet staff will analyze current statewide and regional caseload age distribution to establish baseline for future determination of targets for infant referrals and caseload.

APR Template - Part C (4)

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2006 (if applicable)

SPP improvement activities will be updated following OSEP review of this APR.

During FFY 2007, DHEC will discuss BabyNet caseload targets that are based on system capacity and available funding for discussion with participating agencies and the SICC. Revised targets for this indicator with justification will be submitted with the FFY 2007 APR.

Overview of the Annual Performance Report Development:

Same as previously described.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 6: Percent of infants and toddlers birth to 3 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to National data.

FFY	Measurable and Rigorous Target				
2006	(A)	% Toddlers birth to 3 with IFSPs compared to other States with similar eligibility definitions	Meet or exceed comparison state average		
2006	(B)	% Infants and toddlers birth to 3 with IFSPs compared to national data	Meet or exceed national %		

Actual Target Data for FFY 2006:

(A) Less than comparison state average

(B) Less than national %

	Total population birth to 3	Population birth to 3 with IFSPs	% Population birth to 3 with IFSPs	Average % pop birth to 3 with IFSPs
National data (50 states and DC)	12,341,931	3,381	2.43	
States w/ NARROW eligibility criteria				2.02
South Carolina	171,133	299,848	1.98	

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2006 (2006-2007):

Explanation of FFY 2006 Performance

SC has not met established target for total caseload in comparison to narrow eligibility states and national data. However, the daily census of children receiving BabyNet services increased by 183

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APR Template – Part C (4)

(6%) over the FFY 2005 "December 1 count" of 3,198. The caseload has since remained at or above the 3,190 target (2% of population) established by OSEP in 2003 at the beginning of the three year SC Compliance Agreement.

Actions to improve performance and/or correct identified non-compliance

Currently successful child find activities listed in the State Performance Plan (SPP) will continue.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2006 (if applicable)

SPP improvement activities will be updated following OSEP review of this APR.

Targets for this indicator were developed without complete analysis of trends in the comparison data. During FFY 2007, DHEC will discuss BabyNet caseload targets that are based on system capacity and available funding for discussion with participating agencies and the SICC.

Revised targets for this indicator with justification will be submitted with the FFY 2007 APR.

Overview of the Annual Performance Report Development:

Same as previously described.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 7: Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline) divided by the (# of eligible infants and toddlers evaluated and assessed)] times 100.

Account for untimely evaluations.

FFY	Measurable and Rigorous Target
2006	100%

Actual Target Data for FFY 2006: 77%

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2006 (2006-2007):

Measurement

Methods used to calculate performance on this indicator for OSEP reporting have changed several times over the past three years. The methodology was revised again for this report based on OSEP response to the FFY 2005 APR. Calculations are as follows:

Sample (N) 66 # Children referred March 1-2, 2007

Numerator: 27 # Children referred March 1-2, 2007 with IFSP completion

within 45 days of referral (on or before April 17, 2007)

Denominator: 35 # Children referred March 1-2, 2007 who remained active

for at least 45 days after referral (i.e. did not exit before

April 17, 2007)

Explanation of Progress or Slippage

SC did not meet the 100% target. Progress or slippage from FFY 2005 can not be accurately assessed due to changes in methodology used to calculate the measure.

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Actions to improve performance and/or correct identified non-compliance

	Improvement Activity	Lead Person / Agency	Completion Date	Notes
1.	Updated policy and procedure manual	DHEC	August 2006	
2.	Regular monitoring of performance at caseload, agency, region and state levels			Timely IFSP completion will continued to be monitored at the caseload level by service coordinators, at the staff level by supervisors, at the agency level by program managers, and at the regional level by system managers and regional consultants using BabyTrac reports that provide quick, easy to read summaries of children with IFSPs.
3.	Data system revisions			BabyTrac has been updated to provide "flags" for service coordinators that indicate the number of days remaining to complete initial IFSP within 45 days, and to complete 6-month reviews and annual IFSPs. These reminder flags are displayed any time the service coordinator pulls up their caseload to update the file.
				Required reporting during most of the Compliance Agreement (ended 09/06) was based on raw numbers of events – late IFSP, late services, and late transition conferences. BabyTrac data entry and reports were based on these requirements. These simple lists (rather than percentages) are most helpful for service coordinators, supervisors, local teams and program managers use in identifying and counting children with pending and late services.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2006

SPP improvement activities will be updated following OSEP comment on this APR. New targets for this indicator will be developed during FFY 2007 for discussion with the SICC.

Overview of the Annual Performance Report Development:

Same as previously described.

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 8: Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B; and
- C. Transition conference, if child potentially eligible for Part B.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of children exiting Part C who have a IFSPs with transition steps and services) divided by the (# of children exiting Part C)] times 100.
- B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
- C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

FFY	Measurable and Rigorous Target
2006	100%

Actual Target Data for FFY 2006:

A.	88%	
B.	100%	
C.	90%	

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006 (2006-2007):

Measurement

A. Transition steps included in IFSP

Numerator: Records with completed transition section of IFSP

Denominator: Total records reviewed, June 2007

66

58

State: South Carolina

B. LEA notification at 24 months

Numerator: # Active children 24 months of age whose directory

information sent to the appropriate school district by June

30, 2007 480

Denominator: # Active children turning 24 months of age in May 2007

C. Transition conference by age 33-36 months

Numerator: Active children ages 33-36 months with completed

transition conference

468

480

Denominator: Total active children ages 33-36 months

522

Explanation of Progress or Slippage

A. Transition Planning (FFY 2005 Data: 53%-80%)

The extent of improvement on this indicator is underestimated because although BabyNet policies and procedures effective August 2006 required that transition planning begin with the initial IFSP regardless of the child's age at entry, instructions on the IFSP <u>form</u> indicated that it was to be completed only for children age two and over. Thus the standard for the record review was inconsistent with what service coordinators believed to be the appropriate action.

B. Transition Notification (FFY 2005 Data: 100%)

SC continues system of notification that assures 100% compliance. Each month the eight regional BabyNet system managers run a BabyTrac report with directory information for all active children (i.e. with an IFSP) that turned 24 months or had an initial IFSP completed in the previous month. This information is automatically generated through BabyTrac for each school district. The information is sent to the designated LEA contact by the 5th of each month, or distributed during local team meetings. DHEC central office BabyNet staff and State Department of Education (SDE) Part B staff can run reports at any time.

C. Transition Conference (FFY 2005 Data: 87%)

SC performance on this indicator has improved. SC continues to build on local agreements between BabyNet system managers and supervisors and LEA staff to assure effective transition between Part C and Part B services. The activities are listed below are implemented within a context of on-going personal interaction between BabyNet program and LEA staff to assure appropriate services for children preparing for and entering pre-school services. There are regularly scheduled opportunities for face-to-face discussions and problem solving, in addition to telephone and email communication at any time.

Actions to improve performance and/or correct identified non-compliance

	Improvement Activity	Lead Person / Agency	Completion Date	Notes
1.	Clarification of policy and procedure manual.	DHEC	November 2007, on- going	Updated guidance related to where and how to document transition planning in the child's record were fully clarified in November 2007 with revisions to the policy manual to clarify that transition planning is to:
				Begin with the initial IFSP and be updated at least annually;
				 Include IFSP goals to address transition related knowledge, skills, and activities;
				Include educating family about differences between Part B and Part C services; and
				Include target dates for service coordinator completion of key transition tasks.
2.	Revision of forms to assure consistent documentation.	DHEC	August 2006, on-going	The transition section of the IFSP form has been revised to include prompts for development of appropriate transition planning from the time the child is determined to be eligible for Part C services.
3.	Statewide training, technical assistance and consultation	Training organized by	August 2006, on-going	 Service coordination agencies provided training between August and November 2006 regarding the changes listed above.
		geography and/or agency		BabyNet regional consultants regularly review current and revised policies, and discussion of questions or issues during local coordination team meetings.
				 Transition issues identified by any collaborating agency (or others) during program manager, BabyNet system manager meetings, and DHEC BabyNet staff meetings.
4.	Regular schedule for state-level interagency review of transition issues.	DHEC	August 2006, on-going	State-level early intervention program managers in service coordinating agencies (DHEC, DDSN, SDB) meeting monthly. Each quarter these meetings are expanded to include all collaborating agencies, though all meetings are open. Meeting agenda and notes are sent to all program managers.
				To the extent possible, transition issues will be held for discussion at quarterly meetings when the Part B program can participate. Every effort has been made to facilitate regular Part B participation in monthly BabyNet program manager meetings.

	Improvement Activity	Lead Person / Agency	Completion Date	Notes
5.	Regular schedule for local interagency review of transition issues	DHEC	August 2006, on-going	LEA representatives are invited to attend local coordination team meetings at least quarterly to discuss issues relevant to transition practices.
6.	Technical assistance	OSEP, RRC	As scheduled	DHEC actively participates in Regional Resource Center transition technical assistance meetings and conference calls designed to identify best transition practices and to facilitate incorporation into BabyNet system.
7.	"Automatic" transition notification	DHEC	On-going	During FFY 2007, DHEC will assure that BabyNet system managers continue to send monthly transition notification reports to designated contact in each school district their regions. These reports include directory information for all children turning 24 months old (or with initial IFSP after age 24 months).
8.	Data system updates and transition data sharing	All	February 2008 and on- going	DHEC will send a monthly "status" report for each LEA listing all active children turning 30 months of age in the preceding month to each LEA. For active children, transition referral and transition conference dates will be listed if they have been completed. For children who have exited the program, the reason for exit will be listed. This report will be generated in the BabyNet central office for mailing to each LEA as requested by SDE. The report will allow LEAs to track receipt of referrals from BabyNet and facilitate follow up on listed referrals not received by the LEA.
			Fall 2008 (based on SDE needs) and on-going	DHEC will send SDE of children ages 30-36 months who exited BabyNet and the exit reason. (This information was sent in December 2007 for FFY 2006.) SDE requests this report to facilitate Part B transition reporting.
			Beginning February 2008	DHEC will convene initial meeting, and facilitate regular communication between, for data managers in BabyNet service coordination agencies (DHEC, DDSN, and SDB) with Part B (SDE) in order to identify common data needs and data sharing opportunities.
			In process, on-going as needs are identified	BabyTrac modifications are in currently in process to allow consistent measurement for this indicator to allow accurate tracking trends over time.
9.	Revisions to forms and informational materials	DHEC	September 2007	The "Family Guide to BabyNet Services" was revised to specifically identify required transition steps.

Improvement Activity	Lead Person / Agency	Completion Date	Notes
		November 2006	Transition referral and conference forms were revised in to meet Part C requirements, and posted on the website for easy access by service coordinators statewide.
Technical assistance related to BabyTrac data utilization for caseload management and tracking	DHEC	April 2007, on-going	BabyNet System Managers generate and review BabyTrac reports at least monthly and notify supervisors in all service coordination agencies (DHEC, DDSN, SDB) of past due transition referrals or transition conferences for follow up by each individual agency.
			BabyNet regional consultant reviewed procedures for generating BabyTrac transition referral and transition conference reports and for utilizing these reports for tracking pending and overdue transition actions.
			Specific instructions for accessing these BabyTrac reports have been distributed to system managers, coordination team members, service coordinators, supervisors, and program managers.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Proposed Revisions to the State Performance Plan (SPP)

SPP improvement activities will be updated following OSEP review of this APR.

Overview of the Annual Performance Report Development:

Same as previously described.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 9: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent of noncompliance corrected within one year of identification:

- a. # Of findings of noncompliance.
- b. # Of corrections completed as soon as possible but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

FFY	Measurable and Rigorous Target
2006	100%

Actual Target Data for FFY 2006:

Indicator	Activity/Data Source	# Programs monitored	# Findings	# Findings corrected within a year of identi- fication
Percent infants and toddlers with IFSPs who	Monitoring	*	0	n/a
receive early intervention services in a timely manner.	Dispute Resolution	*	0	n/a
2. Percent infants and toddlers who primarily receive	Monitoring	*	0	n/a
early intervention services in the home or in programs for typically developing children.	Dispute Resolution	*	0	n/a
3. Per cent infants and toddlers with IFSPs who	Monitoring	n/a	n/a	n/a
demonstrate improved child outcomes:	Dispute Resolution	n/a	n/a	n/a

Indicator	Activity/Data Source	# Programs monitored	# Findings	# Findings corrected within a year of identi- fication
4. Per cent families participating in Part C who report	Monitoring	n/a	n/a	n/a
that early intervention services have helped the family:	Dispute Resolution	n/a	n/a	n/a
5. Percent infants and toddlers birth to one with IFSPs	Monitoring	*	0	n/a
compared to state and national data.	Dispute Resolution	*	0	n/a
6. Percent infants and toddlers birth to three with	Monitoring	*	0	n/a
IFSPs compared to state and national data.	Dispute Resolution	*	0	n/a
7. Percent infants and toddlers with IFSPs for whom	Monitoring	*	0	n/a
an evaluation, assessment and initial IFSP meeting were conducted within 45 days of referral.	Dispute Resolution	*	0	n/a
 Percent exiting Part C who received timely transition planning to support the child's transition to pre-school and/or other appropriate community services by 3rd birthday: 				
a. Documentation on IFSP	Monitoring	*	0	n/a
	Dispute Resolution	*	0	n/a
b. Timely LEA notification of children potentially	Monitoring	*	0	n/a
eligible for Part B services	Dispute Resolution	*	0	n/a
 Transition conference with appropriate LEA staff. 	Monitoring	*	0	n/a
	Dispute Resolution	*	0	n/a

*BabyNet is a unified, statewide, inter-agency system. There are no contracts or other arrangements with agencies responsible for the full range of IDEA Part C services within a geographic area or for a specific population, not a collection of different programs. All participating agencies and their contractors operate in a completely interactive manner according to a single, jointly developed and approved policy manual. DHEC as lead agency is responsible for system wide monitoring. In addition, each agency conducts self monitoring activities in accordance with agency requirements beyond Part C. Each of these indicators are monitored on a regular basis (at least monthly) at several levels (caseload, SPOE area, statewide, by agency) using the BabyTrac data system. Findings may be issued if a pattern of non-compliance is identified within a SPOE area; however action is required at state and local level by all relevant collaborating agencies to correct non-compliance.

TOTAL FINDINGS	Identified through monitoring	0	n/a
	Identified through dispute resolution	0	n/a
	ALL	0	n/a

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2006 (2006-2007):

Explanation of Progress or Slippage

No significant change in performance.

Actions to improve performance and/or correct identified non-compliance

lm	provement Activity	Lead Person / Agency	Completion Date	Notes
1.	Early identification and resolution of provider or family concerns	DHEC	On-going	Within the BabyNet system every effort is made to identify and correct problems as soon as a concern is identified. Concerns are generally heard first by the service coordinator, if they can't be satisfactorily handled at that level, the matter is forwarded in order (as appropriate) to the supervisor in the service coordinating agency, System Manager, Regional Consultant, and BabyNet complaints officer. Any time along the way the appropriate BabyNet staff are involved in addressing the concern.
				All written complaints received at any level are forwarded to the complaints officer. At that point, every effort is made to resolve the issue without a formal hearing.
2.	Immediate and personalized follow up on all reports of family or provider concerns	DHEC	On-going	Provider relations staff routinely follow up with families when any concern has been reported. Staff have scheduled home visits to talk to family members after issues of concern to their child have been addressed, to give them an opportunity to speak directly to "BabyNet."
3.	Policy clarifications	DHEC	On-going	All previously described activities designed to make all providers of BabyNet services aware of, program policies and procedures contribute to reduction of complaints by assuring that all are aware of program requirements and expectations.
4.	Inter-agency communication	DHEC	On-going	Inter-agency commitment to maintaining lines of communication at multiple levels also contributes to prompt and satisfactory resolution of complaints about Part C system operation.
5.	Updated comprehensive general supervision system	DHEC	On-going	The BabyNet general supervision system is being revised as described below. This comprehensive, multifaceted and integrated system goes beyond emphasis on "focused" monitoring to assure continuous quality improvement.
				These change are possible based on DHEC BabyNet positions approved in FFY 2005 and 2006. Other than military deployment of one staff member, the program is fully staffed.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Proposed Revisions to the State Performance Plan (SPP)

None.

Overview of the Annual Performance Report Development: Same as previously described.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 10: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint. (20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(1.1(b) + 1.1(c)) divided by 1.1] times 100.

FFY	Measurable and Rigorous Target
2006	100%

Actual Target Data for FFY 2006:		%
Total # signed written complaints received	6	
Complaints resolved within 60 days	5	83%
Complaints requiring more than 60 days to resolve	1	13%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage:

Measurement

The only complaint not resolved within 60 days is pending response from the family (following requested meeting) regarding acceptance of compensatory services and scheduling additional evaluations for the child.

Explanation of progress or slippage

- 1. Within the BabyNet system every effort is made to identify and correct problems as soon as a concern is identified. Concerns are generally heard first by the service coordinator, if they can't be satisfactorily handled at that level, the matter is forwarded in order (as appropriate) to the supervisor in the service coordinating agency, System Manager, Regional Consultant, and BabyNet complaints officer. Any time along the way the appropriate BabyNet staff are involved in addressing the concern. All written complaints received at any level are forwarded to the complaints officer. At that point, every effort is made to resolve the issue without a formal hearing
- All previously described activities designed to make all providers of BabyNet services aware of program policies and procedures contribute to reduction of complaints by assuring that all are aware of program requirements and expectations.
- 3. Inter-agency commitment to maintaining lines of communication at multiple levels also contributes to prompt and satisfactory resolution of complaints about Part C system operation.

Actions to improve performance and/or correct identified non-compliance

See Indicator 9.

Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources

None.

Part C State Annual Performance Report for FFY 2006 (2006-2007) (OMB NO: 1820-0578 / Expiration Date: 12/31/2009)

Overview of the Annual Performance Report Development: Same as previously described.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 11: Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(3.2(a) + 3.2(b))] divided by 3.2 times 100.

FFY	Measurable and Rigorous Target
2006	100%

Actual Target Data for FFY 2006:

No hearings.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage: N/A

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources

None.

Part C State Annual Performance Report for FFY 2006 (2006-2007) (OMB NO: 1820-0578 / Expiration Date: 12/31/2009)

Overview of the Annual Performance Report Development:

Same as previously described.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 12: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted).

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = (3.1(a) divided by 3.1) times 100.

FFY	Measurable and Rigorous Target
2006	100%

Actual Target Data for FFY 2006:

No hearing requests.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage:

N/A

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources

None.

Overview of the Annual Performance Report Development:

Same as previously described.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 13: Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(2.1(a)(i) + 2.1(b)(i))] divided by 2.1] times 100.

FFY	Measurable and Rigorous Target
2006	100%

Actual Target Data for FFY 2006:

No mediations.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage:

N/A

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources

None.

Overview of the Annual Performance Report Development:

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 14: State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate. (20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: State reported data, including 618 data, State performance plan, and annual performance reports, are:

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate (describe mechanisms for ensuring error free, consistent, valid and reliable data and evidence that these standards are met).

FFY	Measurable and Rigorous Target				
2006	100%				

Actual Target Data for FFY 2006: 97%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage:

Measurement

Target data calculations based Scoring Rubric recommended by OSEP for reporting on this indicator. See Table next page.

Explanation of progress or slippage

Scoring rubric used for the first time for FFY 2006.

Actions planned or implemented to improve performance and/or address previously identified non-compliance.

Current activities will be continued.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources None.

Part C State Annual Performance Report for FFY 2006 (2006-2007) (OMB NO: 1820-0578 / Expiration Date: 12/31/2009)

OSEP INDICATOR 14 SCORING RUBRIC											
APR Data											
	APR dicator	Valid & Correc Reliable Data Calculati				NOTES			Total Points		
	1	✓	✓		APR				2		
	2			61	"618"				4		
	3 🗸		✓	61	618"				4		
	4 🗸		✓	61	618"				4		
	5 🗸 🔻		✓		APR				2		
	6 🗸		✓		APR				2		
	7 🗸		✓		APR				2		
	8A 🗸		✓		APR				2		
	8B ✓		✓		APR				2		
	8C ✓		✓	,	APR				2		
	9 🗸		✓		APR				2		
	10 🗸		✓		APR				2		
	11 🗸		✓		APR				2		
	12 🗸		✓		APR				2		
	13 🗸		✓		APR				2		
				Subtotal=[(# APR data cel	ls checked)+[(#	#618 data cells	checked x 2)]	36		
				*Tim	ely Submission	Points= 5 if FF	Y 2006 APR sul	omitted 2/1/08	5		
								APR TOTAL	41		
				618 S	tate-Reported	d Data	T	Daggardad			
	Table		Due Date	Date Submitted	Timely Submission	Complete Data	Passed Edit Check	Responded to Data Note Requests	Total		
1	1 Child Count		02/1/07		✓	✓	✓	✓	4		
2	Prograi	m Settings	02/1/07		✓	✓	✓	✓	4		
3	Exit Da	ta	11/1/07		✓	✓	✓	✓	4		
4	4 Dispute Resolution		11/1/07		✓	✓	✓	✓	4 16		
Subtotal											
618 TOTAL = (Subtotal x 3) Indicator #14 Calculation											
A APR Total											
B 618 Total									41 48		
C APR/618 Subtotal = APR Total + 618 Total = (A) + (B)											
D											
Е											

^{*} Note: Any cells marked with N/A will decrease the denominator by 1 for APR and 3 for 618 data.

Definitions

<u>Timely</u> – All data for the APR are submitted on or before February 1, 2008. Data for tables for 618 are submitted on or before each tables' due date. NO extensions.

<u>Valid and Reliable Data</u> - Data provided are from the correct time period, are consistent with 618 (when appropriate) and the measurement, and are consistent with previous indicator data (unless explained).

 $\underline{\textbf{Correct Calculation}} \text{ - Result produced follows the required calculation in the instructions for the indicator.}$

<u>Instructions Followed</u> - APR provides information required in the instructions for the indicator. For example, when required, explanation provided, raw data and/or definitions given, or response provided to previous OSEP APR analysis.

APR Template - Part C (4)

<u>Complete Data</u> – No missing sections. No placeholder data. Data submitted from all districts or agencies. For example, when the instructions for an indicator require data broken down into subparts, data for all subparts are provided.

<u>Passed Edit Check</u> - Tables submitted to Westat do not have missing cells or internal inconsistencies. (See https://www.ideadata.org/TAMaterial.asp regarding Westat edit checks.)

Responded to Data Note Requested - Provided written explanation to Westat in response to data note requests.